



Under the Paperwork Reduction Act of 1995, no persons are required to respond to a collection of information unless it displays a valid OMB control number.

**CHANGE OF
CORRESPONDENCE ADDRESS
Application**

Address to:
Commissioner for Patents
P.O. Box 1450
Alexandria, VA 22313-1450.

Application Number	09/897,103
Filing Date	July 3, 2001
First Named Inventor	HELLBUSCH
Art Unit	2155
Examiner Name	B. Barot
Attorney Docket Number	0307091.0116

Please change the Correspondence Address for the above-identified application to:

☐

Customer Number

Type Customer Number here

Place Customer
Number Bar Code
Label here

OR

<input checked="" type="checkbox"/> Firm or Individual Name	Stephen C. Glazier Kirkpatrick & Lockhart LLP				
Address	1800 Massachusetts Ave., NW, Suite 200				
Address					
City	Washington	State	DC	ZIP	20036
Country	USA				
Telephone	(202) 778-9000	Fax	(202) 778-9100		

This form cannot be used to change the data associated with a Customer Number. To change the data associated with an existing Customer Number use "Request for Customer Number Data Change" (PTO/SB/124).

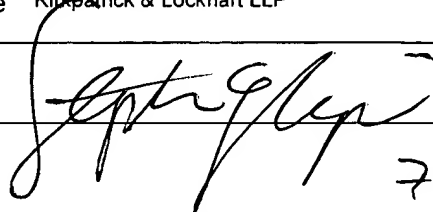
I am the :

- ☐ Applicant/Inventor.
- ☐ Assignee of record of the entire interest.
Certificate under 37 CFR 3.73(b) is enclosed (Form PTO/SB/96).
- ☒ Attorney or agent of record.
- ☐ Registered practitioner named in the application transmittal letter in an application without an executed oath or declaration. See 37 CFR 1.33(a)(1). Registration Number _____

Typed or
Printed Name Stephen C. Glazier (Registration No. 31,361)
Kirkpatrick & Lockhart LLP

Signature

Date


7 NOV 05

NOTE: Signatures of all the inventors or assignees of record of the entire interest or their representative(s) are required. Submit multiple forms if more than one signature is required, see below.

☐ *Total of _____ forms are submitted.